

Form CPF M 101 BQ: STATEMENT OF ORGANIZATION BALLOT QUESTION COMMITTEE

MUNICIPAL FORM

Office of Campaign and Political Finance LERK

Commonwealth of Massachusetts

File with: City or Town Clerk or Election Commission

2015 FEB 17 A 10: 37

Please print or type all information, except signatures

NOTICE IS HEREBY GIVEN, in accordance with the	provisions of M.G.L.	Chapter 55, of the organization of
a ballot question committee as follows:	- -	

1.	Name: (See note 1)	VOTE YES FOR BROOKLINE
2.	Mailing Address:	BROOKLINE, MA 02446
3.	Purpose/ Specific issues and interests (See note 2)	TO SUPPORT A YES VOTE ON THE OVERLIDE AND DEPT EXCUSION QUESTIONS ON MAY 5, 2015
4.	Topic of question:	Question number, if applicable
5.	Committee is formed to (ch	eck one): support / oppose the question.
,	Chairman: lebecca Treasurer: Non Sok	Residential Address City/State/ZIP Tel. No. STONE 71 TOXTETH ST BROOKLINE MA 02446 617.278.9270 ROON 87 107 ST BROOKLINE MA 02446 508 265 1362 USh INSKY 20 Henry St Brookline Ma 02445 417-739-018/ nal page, if ngcessary, with other officers and finance committee, if any.
he	chairman and treasurer of a politic	al committee should be aware that provisions of M.G.L. c. 55 specify that each treasurer of a

The chairman and treasurer of a political committee should be aware that provisions of M.G.L. c. 55 specify that each treasurer of a political committee shall keep and preserve detailed accounts, vouchers and receipts for a period of six years from the date of the relevant election. Chapter 55 also specifies that no expenditures shall be made for, or on behalf of, a political committee without the authorization of the chairman or treasurer, or their designated agents; and, that all the funds of a political committee shall be kept separate from any personal funds of any officers, members or associates of such committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

I hereby accept the office of Chairman of the above-named committee:	2/14/	15
Chairman's signature	Date	

I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports. I am aware that an appointed public employee may not serve as treasurer of a ballot question committee.

Treasurer's signature

7/14/15 Date



MUNICIPAL FORM

Office of Campaign and Political Finance

RECEIVED TOWN OF BROOKLINE TOWN CLERK

Date

File with:	2015 MAR 16 12-45)
City or Town Clerk or Election Co		-
	Please print or type all information, except signatures	
NOTICE IS HEREBY GIV candidate's committee as for		
1. Committee Name:	Committee Marient Pamela Lodish Sel (The name of the committee must include the candidate's last name) ss: 195 Fisher Ave: Brookline MA 05	Lectman
2. Committee Address	s: 195 Fisher Ave: Brookline MA 05	1445
2a. Mailing Address:	same	· · · · · · · · · · · · · · · · · · ·
3. Purpose:	Elect Pamela Lodish to Board of Se	<u>lectme</u>
4. Officers: Chairman:	Name Fred Levitan Zip Tel. No.	
Treasurer:	Jonathan Fine	
Other officer:		<u>-</u> _
Other officer:		
5. Candidate:	Artach additional page, if necessary, with other officers and finance committee, if any Pamela Lodish, 195 Fisher Avc. Bross Name 02445 Address 617-566-55 3218 Tel. No.	Kline MA
6. Office Sought:	Board of Selectmen Brookline Maritice Party affiliation, if applicable	4
	I hereby consent to the filing of this committee. I understand that a candidate shall not give consent organization of more than one committee on his/her behalf. I am aware that candidates are require keep detailed accounts and records of all campaign finance activity for a period of six years from the of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY:	d to
	Candidate's signature Date	
	I hereby accept the office of treasurer of the above-named committee. I understand that I am subject certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reand keeping detailed accounts and records of all campaign finance activity for a period of six years the date of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY:	ports
•	I hereby accept the office of Chairman of the above-named committee. SIGNED UNDER THE PENALTIES OF PERJURY: 3-12-11	



Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE TOWN OF REPORT

MUNICIPAL FORM

Office of Campaign and Political Finance

TOWN OF BROOKLINE TOWN CLERK

2015 MAR -3 A 9: 43

File with: City or Town Clerk or Election Commission Please print or type all information, except signatures NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows: 1. Committee Name: 2. Committee Address: 2a. Mailing Address: above 3. Purpose: 4. Officers: Residential Addre Zip Tel. No. Chairman: 115 Sexual 617.513.8908 Treasurer: 4 Euston St #3 Brookly Other officer: Other officer: Attach additional page, if necessary, with other officers and finance committee, if any 5. Candidate: 6. Office Sought: Selectman Title Party affiliation, if applicable I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY: Candidate's signature Date

I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

Treasurer's signature 3/2/15

I hereby accept the office of Chairman of the above-named committee. SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature Date



MUNICIPAL FORM

Office of Campaign and Political Finance VEU

TOWN OF BROOKLINE TOWN CLERK

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures $2015\,$ MAR $-5\,$ A $11:\,21\,$ NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows: 1. Committee Name: 2. Committee Address: 2a. Mailing Address: 3. Purpose: 4. Officers: Chairman: Treasurer: Other officer: CAPAL Other officer: Attach additional page, if necessary, with other officers and finance committee, if any 617277-6108 5. Candidate: Tel. No. 6. Office Sought: Title District Party affiliation, if applicable I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY: Candidate's signature I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY: Treasurer's signature

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:



MUNICIPAL FORM

Office of Campaign and Political Finance

RECEIVEU TOWN OF BROOKLINE TOWN CLERK

2015 MAR 26 P 12: 07

File with: City or Town Clerk or Election Commission Please print or type all information, except signatures NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows: 1. Committee Name: (The name of the committee must include the candidate's last name 2. Committee Address: 6500 2a. Mailing Address: 3. Purpose: 4. Officers: Zip Tel No. Chairman: Treasurer: Other officer: Other officer: Attach additional page, if necessary, with other officers and finance committee, if any 5. Candidate: Tel. No. 6. Office Sought: Title Party affiliation, if applicable I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY: Candidate's signature I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED UNDER THE PEMALTIES OF PERJURY: Treasurer's signature I hereby accept the office of Chairman of the above-named committee. SIGNED UNDER THE PENALTIES OF PERJURY:



MUNICIPAL FORM Office of Campaign and Political Finance

RECEIVED TOWN OF BROOKLINE TOWN CLERK

File with:

2015 MAR 20 A 9:55

City or Town Clerk or Election Commission Please print or type all information, except signatures NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows: 1. Committee Name: 2. Committee Address: 2a. Mailing Address: 3. Purpose: 4. Officers: Street Brookline, MA 02446 617-739-9228 Chairman: Treasurer: Other officer: Other officer: Attach additional page, if necessary, with other officers and finance committee, if any 26 Crowninshield Rd. Brookline, MA 02446 5. Candidate: 6. Office Sought: Party affiliation, if applicable I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY: 3/19/15 Candidate's signature I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY: 3/20/15 Treasurer's signature

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:



Form CPF M101: STATEMENT OF ORGANIZATION

CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

RECEIVED TOWN OF BROOKLINE TOWN CLERK

2015 MAR 19 A 8: 26

File with: City or Town Clerk or Election Co	mmission
	Please print or type all information, except signatures
NOTICE IS HEREBY GIV	VEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a
1. Committee Name:	STRAM for Brookline School Committee (The name of the committee must include the candidate's last name)
2. Committee Address	: 54 Pavell St Brookline, MA 02446
2a. Mailing Address:	Same
3. Purpose:	to elect Beth Jackson Stram to Brookline School Committee
1. Officers: Chairman:	Name Residential Address Stran 54 Powell St 62446 617-815-1048
Treasurer:	Richard Strain 5+ Powell St 02446 617-308-8951
Other officer:	March 300 Contraction of the Con
Other officer:	
	Attach additional page, if necessary, with other officers and finance committee, if any
5. Candidate:	Elizabeth Jackson Stram 54 Powell St. 02446 617-875-1018
6. Office Sought:	School Committee Brookline MA Zip Tel. No.
	Title District Party affiliation, if applicable
	I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED WIDER THE PENALTIES OF PERJURY: Candidate's signature I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY: Date
	I hereby accept the office of Chairman of the above-named committee. SIGNED UNDER THE PENALTIES OF PERJURY:
6	318 15
	Chairman's signature Date



MUNICIPAL FORM
Office of Campaign and Political Finance OWN OF BROOKLINE TOWN CLERK

ommission	20	DIS FER II A II	
Please print or	type all information, except signs	atures	
VEN in accordance with the ollows:	provisions of General Laws, Chap	oter 55, as amended, of the organi	zation of a
Committee to	Elect Bernard G	reene	
87 IN STR	EET BROOKUNE,	MA 07446	
TO SUPPORT THE	CAMDIDACY OF B	ENVARS GREENE	
Name Bobbie Knable	Residential Address 243 Mason Terrace	Zip Tel. No. 	2096
Neil Gordon	87 luy Street	02446 608-265-	1362
	,		-
Bernard Gre	ene 77 Parkstree	t 02446 617-	131-2580
Name Board of Selectane	Address Brookline UA	Zip Tel. No.	
Title	District	Party affiliation, if applicable	
organization of more than of keep detailed accounts and of the relevant election.	one committee on his/her behalf, records of all campaign finance a	I am aware that candidates are re-	quired to
certain duties and liabilities and keeping detailed account the date of the relevant elec-	s under M.G.L. c. 55, including the nts and records of all campaign fi stion. NALTIES OF PERJURY:	e timely filing of campaign finan	ce reports
	Please print of VEN in accordance with the follows: Committee to (The name of the committee must): RT 145 STRONG THE Name Robbie Knable Neil Gordon Attach additional page, if necessary Bernard Gre Name Board of Selectant Title I hereby consent to the filling organization of more than of keep detailed accounts and of the relevant election. SIGNED ONDER THE PERSONNEL SIGNED ONDER THE PERSONNEL Candidate's signature I hereby accept the office of certain duties and liabilities and keeping detailed account the date of the relevant election the date of the relevant election.	Please print of type all mormation, except signs of the relevant dependence with the provisions of General Laws, Chapollows: Committee to Elect Review Committee to the committee the candidate's last name)	Please print or type all information, except signatures VEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organical collows: Committee to Elect Revnard Greene (The name of the committee must include the candidate's last name) ENT LY STREET BROOKLINE, MA 02446 TO SURPOINT THE CANDIDACY OF BENJARD GREENE Name Residential Address Robbite Knable 243 Masen Terrace 02446 617-781 Neil Gordon 87 lvy Street 02446 617-781 Neil Gordon 87 lvy Street 02446 617- Name Board of Selectmen Brookline M Title District Party affiliation, if applicable I hereby consent to the filing of this committee. I understand that a candidate shall not give coorganization of more than one committee on his/her behalf. I am aware that candidates are reskeep detailed accounts and records of all campaign finance activity for a period of six years frow of the relevant election. SIGNED INDER THE PENALTIES OF PERJURY: Laws 2/10/17 Candidate's signature Date I hereby accept the office of treasurer of the above-named committee. I understand that I americated the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY: 2/10/17 Cardidate's signature Date I hereby accept the office of treasurer of the above-named committee. I understand that I american duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance and keeping detailed accounts and records of all campaign finance activity for a period of six years from the content of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY:



File with:

Form CPF M101: STATEMENT OF ORGANIZATION

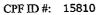
CANDIDATE'S COMMITTEE MUNICIPAL FORM

RECEIVED TOWN OF BROOKLINE TOWN CLERK

Office of Campaign and Political Finance

2015 FEB 27 P 1: 07

City or Town Clerk or Election Co	Innisaca
	Please print or type all information, except signatures
NOTICE IS HEREBY GIV candidate's committee as for	EN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a ollows:
1. Committee Name:	The name of the committee must include the candidate's last name)
2. Committee Address:	in a D who have a HA Winds I'M to let
2a. Mailing Address:	- SAME -
3. Purpose:	ELECTION to BUSED of falket MEN - BROOKLINE
4. Officers: Chairman:	Name K MARLICE, 22 WHITE PLACE BRUKING
Treasurer:	FRANK FARLOW, 8 BOWLER SMERT, BROKLINE
Other officer:	
Other officer:	
	Attach additional page, if necessary, with other officers and finance committee, if any
5. Candidate:	M.K. Marchick, 22 WHITE PIACK, DROKKE
6. Office Sought:	Jaleco No Town of BRUILINE MA
•	Title District Party affiliation, if applicable
	I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY: Machine 2/27/15 Candidate's signature Date
	I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election. SIGNED UNDER THE PENALTIES OF PERJURY: J. 27/15 Treasurer's signature I hereby accept the office of Chairman of the above-named committee. SIGNED UNDER THE PENALTIES OF PERJURY: M. W. BORGO, J. 27/15
	Chairman's signature Date





Form CPF 101 P: Change of Purpose Candidate's Political Committee Office of Campaign and Political Finance

File with: Director Office of Campaign and Political Finance One Ashburton Place, Room 411 Boston, MA 02108 (617) 979-8300 (800) 462-OCPF ocpf@cpf.state.ma.us http://www.mass.gov/ocpf

ce previously held/sou	Selectman - To	wn of Brookling		
,	Selectman - To	wn of Brookline		
//C 11 11 \		WIT OF BLOOKING		
y (if applicable):	Previous: Green	n-Rainbow Current: non-partisan N/A		· .
nmittee:	Merelice for Ma	ssachusetts		
•	Mailing Address:	8 Bowker Street		
	City / State / Zip:	Brookline	MA	02445
ntact Person:	Frank Farlow, T	reasurer (New)		
	Mailing Address:	8 Bowker Street		•
	City / State / Zip:	Brookline	MA	02445
•	Email: frank.fa	rlow@verizon.net	Phone #:	(617) 232-9654
1	itact Person:	tact Person: Frank Farlow, 7 Mailing Address: City / State / Zip:	Mailing Address: 8 Bowker Street City / State / Zip: Brookline	tact Person: Frank Farlow, Treasurer (New) Mailing Address: 8 Bowker Street City / State / Zip: Brookline MA

In accordance with the requirements of M.G.L. c. 55, I hereby certify that the above-named political committee is now organized for the purpose stated above.

SIGNED UNDER THE PENALTIES OF PERJURY:

poquille	Date: Feb 27, 201
Treasurer's signature	
MX Merelice	Date: Feb 27, 2015
Candidate's signature	



Commonwealth of Massachusetts

Form CPF M 101 BQ: STATEMENT OF ORGANIZATION **BALLOT QUESTION COMMITTEE MUNICIPAL FORM**

Office of Campaign and Political Binance BROOKLINE
TOWN CLERK Please print or type all information, except signatures 2015 FEB 19 P 12: 23

File with: City or Town Clerk or Election Commission

Date

	TICE IS HEREBY GIVEN, in accordance with the provisions of M.G.L. Chapter 55, of the organization of allot question committee as follows:
	Name: Coromittee for a Botter Overvile (See note 1)
2.	Mailing Address: #9 # HV5/20 Road Brookline MA 02445
3.	Purpose/ Specific issues and interests (See note 2) DISOFTIRE PAR CE. TO
4.	Topic of question: Proposition 21/2 Obervide 1 Question number, if applicable
5.	Committee is formed to (check one): support / oppose the question.
6.	Officers: Name Residential Address City/State/ZIP 02467 Tel. No. Chairman: Lichard W. Bonkz 26 Civeur food Brooking MA 617-777-6102 Treasurer: Other Officer: Attach additional page, if necessary, with other officers and finance committee, if any.
polit relev auth	chairman and treasurer of a political committee should be aware that provisions of M.G.L. e. 55 specify that each treasurer of a tical committee shall keep and preserve detailed accounts, vouchers and receipts for a period of six years from the date of the vant election. Chapter 55 also specifies that no expenditures shall be made for, or on behalf of, a political committee without the corrization of the chairman or treasurer, or their designated agents; and, that all the funds of a political committee shall be kept that from any personal funds of any officers, members or associates of such committee.
	SIGNED UNDER THE PENALTIES OF PERJURY:
	I hereby accept the office of Chairman of the above-named committee:
	Co-Chairman's signature Date
	I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports. I am aware that an appointed public employee may not serve as treasurer of a ballot question committee.

Treasurer's signature



Form CPF M 101 BQ: STATEMENT OF ORGANIZATION BALLOT QUESTION COMMITTEE MUNICIPAL FORM

Commonwealth of Massachusetts

Office of Campaign and Political Finance
TOWN CLERK

* AMENDED*

File with: City or Town Clerk or Election Commission

Please print or type all information, except signatures P 2: 01

	TICE IS HEREBY GIVEN, i llot question committee as fo	n accordance with the provisions of M.G.L. Chapter 55, of the organization of ollows:	
1.	Name: (See note 1)	Comprien for a Better Override	
2.	Mailing Address:	9 Hyslop Road	
	•	Brook I'me, MA 02,495	
3.	Purpose/ Specific issues and interests (See note 2)	Lee # 15 below	
	A STATE OF THE STA		
4.	Topic of question:	Proposotion 21/2 General Overrile #1	
		Question number, if applicable	
_. 5.	Committee is formed to (cl	neck one): support / oppose the question.	
6.	Chairman: Richer. Treasurer: Other Officer:	Residential Address City/State/ZIP Tel. No. W. Bon) & Z & City of Prophyse Pho 2467 677-277-6K of H. Brown 9 Hys/sp Road Brooklive HA 02445 61-7-232-2 mal page, if necessary, with other officers and finance committee, if any.	57 5626
poli rele auth	tical committee shall keep and presont election. Chapter 55 also specorization of the chairman or treasure.	cal committee should be aware that provisions of M.G.L. c. 55 specify that each treasurer of a serve detailed accounts, vouchers and receipts for a period of six years from the date of the cifies that no expenditures shall be made for, or on behalf of, a political committee without the arer, or their designated agents; and, that all the funds of a political committee shall be kept by officers, members or associates of such committee.	
	SIGNED UNDER THE I	PENALTIES OF PERJURY:	
	I hereby accept the office of Chairman's sign	Chairman of the above-named committee: 25 F.6.20 (5 nature Date	
	liabilities under M.G.L. c. 55	reasurer of the above-named committee. I understand that I am subject to certain duties and, including the timely filing of campaign finance reports. I am aware that an appointed public easurer of whallot question committee.	
	M	25 feb. 2015	
	Treasurer's sig	Date	



Form CPF M 101 BQ: STATEMENT OF ORGANIZATION BALLOT QUESTION COMMITTEE MUNICIPAL FORM

Commonwealth of Massachusetts Office of Campaign and Political Finance BROOKLINE

File with: City or Town Clerk or Election Commission

Please print or type all information, except signatures 2015 MAR 16 P 12: 01

NOTICE IS HEREBY GIVEN, in accordance with the provisions of M.G.L. Chapter 55, of the organization of a ballot question committee as follows:

• • • • • • • • • • • • • • • • • • •						
1. Name: (See note 1)	· -	Committee Ev			· ·	
		<u> </u>	nsim ot	2 CN8812	in Bro	ikline
2. Mailing Address	SS;	66 Eva	ins Rd,	Brockli	ne, MA C	2445
Purpose/ Speciand interests	fic issues	Capital			chools in	
	-	<u>B1-</u>	skline			
4. Topic of questi	on:	Debt Ex	clusion fo	r Devit		wilding project
					Questio	n numoer, a appacaote
5. Committee is f	ormed to (che	ck one): support	/ 0	ppose X	the question.	
	•	,			^	
6. Officers:	Name_	Residential Ad	Idress	City/State/ZI	<u>P</u> <u>Tel</u>	. No.
Chairman:	Perry Stall	66 Evans	121	Brooklin	e , MA 02445	617-733-8764
Treasurer:	PRITY Stol	4 4		Brookline.	WA 82441	617-730-8284
Other Officer:	1					
	Attach additions	I page, if necessary, wi	th other officers and	I finance committe	e, if any.	
The chairman and treasured political committee shall relevant election. Chap authorization of the chaseparate from any personal properties.	ll keep and presenter 55 also specification or treasure	rve detailed accounts, ies that no expenditur, or their designated	, vouchers and recures shall be made lagents; and, that	eipts for a period for, or on behalf all the funds of a	I of six years from to of, a political comm	he date of the nittee without the
SIGNED UN	IDER THE PI	ENALTIES OF PI	ERJURY:			
I hereby accep	t the office of Ch	airman of the above-	named committee	:		
	Pen a	Set		3/1	6/215	
***	Perg G Chairman's signa	ture			Date	
I hereby accep	t the office of tre	asurer of the above-n ncluding the timely fi surer of a ballot ques	iling of campaign			
				2	(16/2015	
-	Treasurer's signa	fure) i	(16/2015 Date	
	rivasurvi a signa	rus o			,ar vigo	